Docket No.: AUS-2136-AL

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

n re application:

Caldwell et al.

Serial No.: 10/052,297

Filed: January 18, 2002

For: HAND ACCESS PORT DEVICE

Mail Stop Amendment - Fee Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Docket No.: AUS-2136-AL

Examiner: Robert, Eduardo C.

Art Unit: 3732

APR 1 9 2004
TECHNOLOGY CENTER RESTOR

<u>AMENDMENT</u>

Dear Sir:

This Amendment is filed in response to an Office Action mailed February 12, 2004. A shortened statutory period for response has been set to end April 12, 2004.

History of Prosecution

This application was filed with a total of 63 claims. In response to a Restriction Requirement, Applicant elected claims 1-13 for further prosecution and claims 14-63 were cancelled from consideration. In the instant Office Action, claims 1-9 are allowed and claims 10-13 are objected to. In particular, claim 10 and its dependent claims 11-13 are objected to for being multiply dependent on claim 9, which is also a multiple dependent claim. It is respectfully requested that the following changes be made to the application.

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AMENDMENT TRANSMITTAL LETTER

In re application of Serial No. Filed:

For:

Caldwell, et al.

10/052,297

January 18, 2002

Hand Access Port Device

Attorney Docket No.: AUS-2136-AL

Examiner: Robert, Eduardo C.

Group Art Unit: 3732

Mail Stop Fee Amendment Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified [x]

statement previously submitted.

A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed. []

The filing fee has been calculated as shown below:

•	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	13	MINUS	62	0
INDEP.	2	MINUS	6	0
Li First Presentation of Multiple Den. Claim				

ſ]First	Presentation	of Multi	ple Dep.	Claim

	SMALL ENTITY	
	RATE	ADDIT. FEE
	x 9	0
	x 43	0
	+140	-
Total Addit. Fee		\$0

43	0	
140	-	or
e	\$0	T

	OTHER THAN SMALL ENTITY	
	RATE	ADDIT. FEE
	x 18	-0-
	x 84	-0-
	+280	-0-
ta		\$0

Please charge my Deposit Account No. _ the amount of \$ _____. A duplicate copy of this sheet is attached. Check No. in the amount of \$_____ is attached for payment of filing and extension fees for this amendment and Notice of Appeal filing fee.

 \boxtimes The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 01-2215.

A duplicate copy of this sheet is enclosed.

[X] Any additional filing fees required under 37 C.F.R. 1.16.

[X] Any patent application processing fees under 37 C.F.R. 1.17.

Respectfully submitted,

Kenneth K. Vu

Attorney for Applicant

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